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7590

05/05/2004

Bronislava Shteyngart MD
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/826,731	04/05/2001	Jerome Owen Cantor		8515

TITLE OF INVENTION: INTRATRACHEAL ADMINISTRATION OF LYSOZYME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/05/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MELLER, MICHAEL V	1654	424-043000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Please check the appropriate assignee category or categories (will not be printed on the patent); individual corporation or other private group entity government

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- Issue Fee
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(Authorized Signature)  5/12/04	(Date)	5/19/2004 HJVONG62 00000073 09826731 01 FC:1504 300.00 OP 02 FC:2501 665.00 OP
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